

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 727938 FILING DATE _____
APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1ST ADJUSTMENT		AFTER 2ND ADJUSTMENT										
	NO	DEP	NO	DEP	NO	DEP		NO	DEP	NO	DEP	NO	DEP	NO	DEP
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50															
TOTAL NO.	6		11												
TOTAL DEP.	23		11												
TOTAL CLAIMS	31		22												